CLAIMS ONLY

Application Number	Filing Date
09/802162	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 9-21-01		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
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13						
14						
15						
16						
17						
18	1					
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49						
50						
Total Indep	2					
Total Depend	40					
Total Claims	42					

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	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						